PTO/SB/21 (09-06)
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## TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

**Application Number** 09/963,875-Conf. #9674 Filing Date September 26, 2001 First Named Inventor Elizabeth Abraham Art Unit 1644 **Examiner Name** M. A. Belyavskyi Attorney Docket Number

Total Number of Pages in This Submission 17633/1235 [1235(203284)] ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please X Otner Endes: x Extension of Time Request Terminal Disclaimer Return Receipt Postcard **Express Abandonment Request** Request for Refund Certficate of Express Mailing (1 pg) Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name **EDWARDS ANGELL PALMER & DODGE LLP** 

Express Mail, Label No. EMO	53195391US, on the	per referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as e date shown below in an envelope addressed to:
MS AF, Commissioner for Pa	itents, P.O. Box 1450	6, Alexandria, VA 22313-1450.
Dated: May 16, 2007	Signature:	(Diane Valeta)

Mathew Beaudit 50,649

Reg. No.

45,123

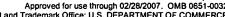
Signature

Date

Printed name

Elizabeth Spar

May 16, 2007



PTO/SB/17 (02-07)
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Effectiv		Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nu	Application Number 09/		9/963,875-Conf. #9674		
FEE TRANSMITTAL			Filing Date		September 26, 2001			
For FY 2007			First Named In	ventor	Elizabeth Abraham			
FUI F1 2001			Examiner Nam	Examiner Name M.		M. A. Belyavskyi		
X Applicant claims small	entity status	. See 37 CFR 1.27	Art Unit					
TOTAL AMOUNT OF PAY	Attorney Docke	Attorney Docket No. 17633/1235 [1235(203284)]						
METHOD OF PAYMEN	T (check al	l that apply)						
Check Credit Card Money Order None Other (please identify):								
X Deposit Account Depo	sit Account Nu	mber: 04-1105 Deposit A	ccount Name:	Edwards	Angell Palmer	& Dodge L	LP .	
For the above-ident	ified depos	it account, the Director	is hereby authoriz	zed to: (ch	eck all that apply)			
x Charge fee(s)	indicated t	pelow	Char	ge fee(s) ii	ndicated below, e	cept for the	filing fee	
Charge any a		e(s) or underpayments 6 and 1.17	of x Cred	it any over	payments			
FEE CALCULATION								
1. BASIC FILING, SEARCH	•							
	FILI	NG FEES SI Small Entity	EARCH FEES  Small Entity		INATION FEES Small Entity			
Application Type	Fee (\$)	Fee (\$) Fee		Fee (\$		Fees Pa	id (\$)	
Utility	300	150 500	250	200	100			
Design	200	100 100	50	130	65			
Plant	200	100 300	150	160	80			
Reissue	300	150 500	250	600	300			
Provisional	200	100	0	0	0			
2. EXCESS CLAIM FEES						<u>s</u>	mall Entity	
Tee Description							Fee (\$) 25	
Each independent claim ov	er 3 (includ	ling Reissues)				200	100	
Multiple dependent claims						360	180	
Total Claims Extra	Claims	Fee (\$) Fee	Paid (\$)	Paid (\$) Multiple Depen		ent Claims		
- 20 =	х	=	<del></del>	E	ee (\$)	Fee Paid (\$)		
HP = highest number of total cla	•	_					-	
	<u>Claims</u>	Fee (\$) Fee	Paid (\$)					
- 3 = HP = highest number of indepen	dent claims pa	aid for, if greater than 3.						
3. APPLICATION SIZE FEE				_	<del></del>		-	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English Specificati								
Other (e.g., late filing surcharge): 2253 Extension for response within third month						510.00		
2401 Notice of appeal 250.00								
SUBMITTED BY	100 111	Har Aller	J. Daniel and D.					
Signature		w Hardy 50,64	Registration No. (Attorney/Agent)	45,123	Telephone	(617) 439	4444	
Name (Print/Type) Elizabeth	<del>Sp</del> ar				Date	May 16, 2	2007	

Express Mail, Label No. EM05	ong with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service a 95391US, on the date shown below in an envelope addressed to:
Dated: May 16, 2007	Signature: (Diane Valeta)

pplication No. (if known): 09/963,875

Attorney Docket No.: 17633/1235 [1235(203284)]

## **Certificate of Express Mailing Under 37 CFR 1.10**

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on May 16, 2007
Date

Deari Maleta					
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Diane Valeta					
Typed or printed name of person signing Certificate					
	(617) 439-4444				
Registration Number, if applicable	Telephone Number				

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page) Fee Transmittal (1 page)

Three Month Request for Extension of Time (1 page)

Notice of Appeal (1 page) Return Receipt Postcard